FEC FORM 2 STATEMENT OF CANDIDACY

| 1. (a) Name of Candidate (in full) | | *************************************** | | | |
|---|--|---|--|--|--|
| Charles Edward Davis (b) Address (number and street) | ☐ Check if address changed | | 2. FEC Candidate Identification Number | | |
| 37 Coconut Court | | | | | |
| (c) City, State, and ZIP Code Palm Coast, Florida 32137 | | | 3. Is This New Amended Statement (N) OR (A) | | |
| 4. Party Affiliation | 5. Office Sought | 6. State & Distr Florida - Dis | 6. State & District of Candidate | | |
| Republican | Congressman | Florida - Dis | tilict 6 | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | |
| 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s). | | | | | |
| NOTE: This designation should be filed with the appropriate office listed in the instructions. (year of election) | | | | | |
| (a) Name of Committee (in full) | | _ | | | |
| | s Campaign for | Congre | ess District 6 Florida | | |
| (b) Address (number and street) | • | | | | |
| 37 Coconut Cou | urt | | | | |
| (c) City, State, and ZIP Code | | | | | |
| Palm Coast, Flo | orida 32137 | | | | |
| | | | | | |
| DE | SIGNATION OF OTHER AU | THORIZED (| COMMITTEES | | |
| | (Including Joint Fundraising | | | | |
| | I was the North Con- | | | | |
| I hereby authorize the following har candidacy. | ned committee, which is NOT my princip | ai campaign com | nmittee, to receive and expend funds on behalf of my | | |
| * | filed with the principal campaign commit | tee. | | | |
| | | | | | |
| (a) Name of Committee (in full) | | | | | |
| | | | | | |
| (b) Address (number and street) | | | | | |
| · . | | | | | |
| (c) City, State, and ZIP Code | | | | | |
| , | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| | mined this Statement and to the best of | my knowledge ai | nd belief it is true, correct and complete. | | |
| Signature of Candidate | _ | | Date | | |
| Clf | teles E. Dav | 15. | July 9, 2021 | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109. | | | | | |
| | | | | | |
| | | | | | |
| 9-00068 | 1 1 | | FEC FORM 2 (REV. 02/2009) | | |

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

| Page | of | |
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee. |
|--|
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |
| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. |
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |
| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. |
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |
| I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. |
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State, and ZIP Code |
| |

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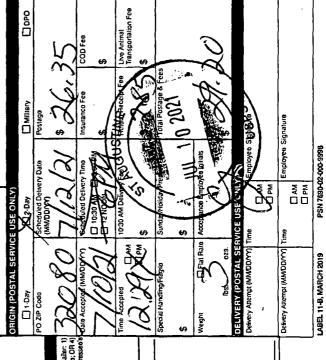
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| USPS Priority Mail Express | Postmarked 7(0/2) |
| Postmark Illegible | |
| No Postmark | |
| Overnight Delivery Service (Specify): | Shipping Date |
| Next Busin | ness Day Delivery |
| Received from House Records & Registration Office | Date of Receipt |
| Received from Senate Public Records Office | Date of Receipt |
| Received from Electronic Filing Office | Date of Receipt |
| Other (Specify): | of Receipt or Postmarked |
| er, | 7/26/21 |
| PREPARER (3/2015) | DATE PREPARED |